



General Assembly

January Session, 2013

## ***Substitute Bill No. 837***



### ***AN ACT CONCERNING THE DEPARTMENT ON AGING.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 7-127b of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective July 1, 2013*):

3 (a) The chief elected official or the chief executive officer if by  
4 ordinance of each municipality shall appoint a municipal agent for  
5 elderly persons. Such agent shall be a member of an agency that serves  
6 elderly persons in the municipality or a responsible resident of the  
7 municipality who has demonstrated an interest in the elderly or has  
8 been involved in programs in the field of aging.

9 (b) The duties of the municipal agent may include, but shall not be  
10 limited to, (1) disseminating information to elderly persons, assisting  
11 such persons in learning about the community resources available to  
12 them and publicizing such resources and benefits; (2) assisting elderly  
13 persons to apply for federal and other benefits available to such  
14 persons; (3) reporting to the chief elected official or chief executive  
15 officer of the municipality and the Department [of Social Services] on  
16 Aging any needs and problems of the elderly and any  
17 recommendations for action to improve services to the elderly.

18 (c) Each municipal agent shall serve for a term of two or four years,  
19 at the discretion of the appointing authority of each municipality, and  
20 may be reappointed. If more than one agent is necessary to carry out

21 the purposes of this section, the appointing authority, in its discretion,  
22 may appoint one or more assistant agents. The town clerk in each  
23 municipality shall notify the Department [of Social Services] on Aging  
24 immediately of the appointment of a new municipal agent. Each  
25 municipality may provide to its municipal agent resources sufficient  
26 for such agent to perform the duties of the office.

27 (d) The Department [of Social Services] on Aging shall adopt and  
28 disseminate to municipalities guidelines as to the role and duties of  
29 municipal agents and such informational and technical materials as  
30 may assist such agents in performance of their duties. The department,  
31 in cooperation with the area agencies on aging, may provide training  
32 for municipal agents within the available resources of the department  
33 and of the agencies on aging.

34 Sec. 2. Section 8-119f of the general statutes is repealed and the  
35 following is substituted in lieu thereof (*Effective July 1, 2013*):

36 The Commissioner of [Economic and Community Development]  
37 Housing shall design, implement, operate and monitor a program of  
38 congregate housing. For the purpose of this program, the  
39 Commissioner of [Economic and Community Development] Housing  
40 shall consult with the Commissioner of Social Services and the  
41 Commissioner on Aging for the provision of services for the physically  
42 disabled in order to comply with the requirements of section 29-271.

43 Sec. 3. Section 17b-4 of the general statutes is repealed and the  
44 following is substituted in lieu thereof (*Effective July 1, 2013*):

45 (a) The Department of Social Services shall plan, develop,  
46 administer, operate, evaluate and provide funding for services for  
47 individuals and families served by the department who are in need of  
48 personal or economic development. In cooperation with other social  
49 service agencies and organizations, including community-based  
50 agencies, the department shall work to develop and fund prevention,  
51 intervention and treatment services for individuals and families. The

52 department shall: (1) Provide appropriate services to individuals and  
53 families as needed through direct social work services rendered by the  
54 department and contracted services from community-based  
55 organizations funded by the department; (2) collect, interpret and  
56 publish statistics relating to individuals and families serviced by the  
57 department; (3) monitor, evaluate and review any program or service  
58 which is developed, operated or funded by the department; (4)  
59 supervise the establishment of pilot programs funded by the  
60 department in local communities which assist and support individuals  
61 and families in personal and economic development; (5) improve the  
62 quality of services provided, operated and funded by the department  
63 and increase the competency of its staff relative to the provision of  
64 effective social services by establishing and supporting ongoing staff  
65 development and training; and (6) encourage citizen participation in  
66 the development of social service priorities and programs.

67 [(b) The Department of Social Services shall study continuously the  
68 conditions and needs of elderly and aging persons in this state in  
69 relation to nutrition, transportation, home-care, housing, income,  
70 employment, health, recreation and other matters. It shall be  
71 responsible in cooperation with federal, state, local and area planning  
72 agencies on aging for the overall planning, development and  
73 administration of a comprehensive and integrated social service  
74 delivery system for elderly persons and the aged. The department  
75 shall: (1) Measure the need for services; (2) survey methods of  
76 administration of programs for service delivery; (3) provide for  
77 periodic evaluations of social services; (4) maintain technical,  
78 information, consultation and referral services in cooperation with  
79 other state agencies to local and area public and private agencies to the  
80 fullest extent possible; (5) develop and coordinate educational  
81 outreach programs for the purposes of informing the public and  
82 elderly persons of available programs; (6) cooperate in the  
83 development of performance standards for licensing of residential and  
84 medical facilities with appropriate state agencies; (7) supervise the  
85 establishment, in selected areas and local communities of the state, of

86 pilot programs for elderly persons; (8) coordinate with the Department  
87 of Transportation to provide adequate transportation services related  
88 to the needs of elderly persons; and (9) cooperate with other state  
89 agencies to provide adequate and alternate housing for elderly  
90 persons, including congregate housing, as defined in section 8-119e.]

91 [(c)] (b) The Department of Social Services, in conjunction with the  
92 Department of Public Health and the Department on Aging, may  
93 adopt regulations in accordance with the provisions of chapter 54 to  
94 establish requirements with respect to the submission of reports  
95 concerning financial solvency and quality of care by nursing homes for  
96 the purpose of determining the financial viability of such homes,  
97 identifying homes that appear to be experiencing financial distress and  
98 examining the underlying reasons for such distress. Such reports shall  
99 be submitted to the Nursing Home Financial Advisory Committee  
100 established under section 17b-339.

101 Sec. 4. Section 17a-317 of the general statutes is repealed and the  
102 following is substituted in lieu thereof (*Effective July 1, 2013*):

103 (a) Effective January 1, 2013, there shall be established a Department  
104 on Aging that shall be under the direction and supervision of the  
105 Commissioner on Aging who shall be appointed by the Governor in  
106 accordance with the provisions of sections 4-5 to 4-8, inclusive, with  
107 the powers and duties prescribed in said sections. The commissioner  
108 shall be knowledgeable and experienced with respect to the conditions  
109 and needs of elderly persons and shall serve on a full-time basis.

110 (b) The Commissioner on Aging shall administer all laws under the  
111 jurisdiction of the Department on Aging and shall employ the most  
112 efficient and practical means for the provision of care and protection of  
113 elderly persons. The commissioner shall have the power and duty to  
114 do the following: (1) Administer, coordinate and direct the operation  
115 of the department; (2) adopt and enforce regulations, in accordance  
116 with chapter 54, as necessary to implement the purposes of the  
117 department as established by statute; (3) establish rules for the internal

118 operation and administration of the department; (4) establish and  
119 develop programs and administer services to achieve the purposes of  
120 the department; (5) contract for facilities, services and programs to  
121 implement the purposes of the department; (6) act as advocate for  
122 necessary additional comprehensive and coordinated programs for  
123 elderly persons; (7) assist and advise all appropriate state, federal, local  
124 and area planning agencies for elderly persons in the performance of  
125 their functions and duties pursuant to federal law and regulation; (8)  
126 plan services and programs for elderly persons; (9) coordinate  
127 outreach activities by public and private agencies serving elderly  
128 persons; and (10) consult and cooperate with area and private  
129 planning agencies.

130 (c) The Department on Aging shall study continuously the  
131 conditions and needs of elderly persons in this state in relation to  
132 nutrition, transportation, home care, housing, income, employment,  
133 health, recreation and other matters. The department shall be  
134 responsible, in cooperation with federal, state, local and area planning  
135 agencies on aging, for the overall planning, development and  
136 administration of a comprehensive and integrated social service  
137 delivery system for elderly persons. The department shall: (1) Measure  
138 the need for services; (2) survey methods of administration of  
139 programs for service delivery; (3) provide for periodic evaluations of  
140 social services; (4) maintain technical, information, consultation and  
141 referral services in cooperation with other state agencies to local and  
142 area public and private agencies to the fullest extent possible; (5)  
143 develop and coordinate educational outreach programs for the  
144 purposes of informing the public and elderly persons of available  
145 programs; (6) cooperate in the development of performance standards  
146 for licensing of residential and medical facilities with appropriate state  
147 agencies; (7) supervise the establishment, in selected areas and local  
148 communities of the state, of pilot programs for elderly persons; (8)  
149 coordinate with the Department of Transportation to provide adequate  
150 transportation services related to the needs of elderly persons; and (9)  
151 cooperate with other state agencies to provide adequate and alternate

152 housing for elderly persons, including congregate housing, as defined  
153 in section 8-119e.

154 [(c)] (d) The functions, powers, duties and personnel of the Division  
155 of Aging Services of the Department of Social Services, or any  
156 subsequent division or portion of a division with similar functions,  
157 powers, personnel and duties, shall be transferred to the Department  
158 on Aging pursuant to the provisions of sections 4-38d, 4-38e and 4-39.

159 [(d)] (e) The Department of Social Services shall administer  
160 programs under the jurisdiction of the Department on Aging until the  
161 Commissioner on Aging is appointed and administrative staff are  
162 hired.

163 [(e)] (f) The Governor may, with the approval of the Finance  
164 Advisory Committee, transfer funds between the Department of Social  
165 Services and the Department on Aging pursuant to subsection (b) of  
166 section 4-87 during the fiscal year ending June 30, 2013.

167 [(f)] (g) Any order or regulation of the Department of Social Services  
168 or the Commission on Aging that is in force on [January] July 1, 2013,  
169 shall continue in force and effect as an order or regulation until  
170 amended, repealed or superseded pursuant to law.

171 Sec. 5. Section 17b-2 of the general statutes is repealed and the  
172 following is substituted in lieu thereof (*Effective July 1, 2013*):

173 The Department of Social Services is designated as the state agency  
174 for the administration of (1) the child care development block grant  
175 pursuant to the Child Care and Development Block Grant Act of 1990;  
176 (2) the Connecticut energy assistance program pursuant to the Low  
177 Income Home Energy Assistance Act of 1981; (3) [programs for the  
178 elderly pursuant to the Older Americans Act; (4)] the state plan for  
179 vocational rehabilitation services for the fiscal year ending June 30,  
180 1994; [(5)] (4) the refugee assistance program pursuant to the Refugee  
181 Act of 1980; [(6)] (5) the legalization impact assistance grant program  
182 pursuant to the Immigration Reform and Control Act of 1986; [(7)] (6)

183 the temporary assistance for needy families program pursuant to the  
184 Personal Responsibility and Work Opportunity Reconciliation Act of  
185 1996; [(8)] (7) the Medicaid program pursuant to Title XIX of the Social  
186 Security Act; [(9)] (8) the supplemental nutrition assistance program  
187 pursuant to the Food and Nutrition Act of 2008; [(10)] (9) the state  
188 supplement to the Supplemental Security Income Program pursuant to  
189 the Social Security Act; [(11)] (10) the state child support enforcement  
190 plan pursuant to Title IV-D of the Social Security Act; and [(12)] (11)  
191 the state social services plan for the implementation of the social  
192 services block grants and community services block grants pursuant to  
193 the Social Security Act. [The Department of Social Services is  
194 designated a public housing agency for the purpose of administering  
195 the Section 8 existing certificate program and the housing voucher  
196 program pursuant to the Housing Act of 1937.]

197 Sec. 6. Subsection (c) of section 17b-28 of the general statutes is  
198 repealed and the following is substituted in lieu thereof (*Effective July*  
199 *1, 2013*):

200 (c) On and after July 1, 2011, the council shall be composed of the  
201 following members:

202 (1) The chairpersons and ranking members of the joint standing  
203 committees of the General Assembly having cognizance of matters  
204 relating to aging, human services, public health and appropriations  
205 and the budgets of state agencies, or their designees;

206 (2) Four appointed by the speaker of the House of Representatives,  
207 one of whom shall be a member of the General Assembly, one of  
208 whom shall be a community provider of adult Medicaid health  
209 services, one of whom shall be a recipient of Medicaid benefits for the  
210 aged, blind and disabled or an advocate for such a recipient and one of  
211 whom shall be a representative of the state's federally qualified health  
212 clinics;

213 (3) Four appointed by the president pro tempore of the Senate, one

214 of whom shall be a member of the General Assembly, one of whom  
215 shall be a representative of the home health care industry, one of  
216 whom shall be a primary care medical home provider and one of  
217 whom shall be an advocate for Department of Children and Families  
218 foster families;

219 (4) Two appointed by the majority leader of the House of  
220 Representatives, one of whom shall be an advocate for persons with  
221 substance abuse disabilities and one of whom shall be a Medicaid  
222 dental provider;

223 (5) Two appointed by the majority leader of the Senate, one of  
224 whom shall be a representative of school-based health centers and one  
225 of whom shall be a recipient of benefits under the HUSKY program;

226 (6) Two appointed by the minority leader of the House of  
227 Representatives, one of whom shall be an advocate for persons with  
228 disabilities and one of whom shall be a dually eligible Medicaid-  
229 Medicare beneficiary or an advocate for such a beneficiary;

230 (7) Two appointed by the minority leader of the Senate, one of  
231 whom shall be a low-income adult recipient of Medicaid benefits or an  
232 advocate for such a recipient and one of whom shall be a  
233 representative of hospitals;

234 (8) The executive director of the Commission on Aging, or the  
235 executive director's designee;

236 (9) The executive director of the Commission on Children, or the  
237 executive director's designee;

238 (10) A representative of the Long-Term Care Advisory Council;

239 (11) The Commissioners of Social Services, Children and Families,  
240 Public Health, Developmental Services and Mental Health and  
241 Addiction Services, and the Commissioner on Aging, or their  
242 designees, who shall be ex-officio nonvoting members;

243 (12) The Comptroller, or the Comptroller's designee, who shall be an  
244 ex-officio nonvoting member;

245 (13) The Secretary of the Office of Policy and Management, or the  
246 secretary's designee, who shall be an ex-officio nonvoting member; and

247 (14) One representative of an administrative services organization  
248 which contracts with the Department of Social Services in the  
249 administration of the Medicaid program, who shall be a nonvoting  
250 member.

251 Sec. 7. Subsection (a) of section 17b-28a of the general statutes is  
252 repealed and the following is substituted in lieu thereof (*Effective July*  
253 *1, 2013*):

254 (a) There is established a Waiver Application Development Council  
255 that shall be composed of the following members: The chairpersons  
256 and ranking members of the joint standing committee of the General  
257 Assembly having cognizance of matters relating to appropriations, or  
258 their designees; the chairpersons and ranking members of the joint  
259 standing committee of the General Assembly having cognizance of  
260 matters relating to aging, or their designees; the chairpersons and  
261 ranking members of the joint standing committee of the General  
262 Assembly having cognizance of matters relating to human services, or  
263 their designees; the chairpersons and ranking members of the joint  
264 standing committee of the General Assembly having cognizance of  
265 matters relating to public health, or their designees; the Commissioner  
266 of Social Services, or [his] the commissioner's designee; the  
267 Commissioner on Aging or the commissioner's designee; the  
268 Commissioner of Public Health, or [his] the commissioner's designee;  
269 the Commissioner of Mental Health and Addiction Services, or [his]  
270 the commissioner's designee; the Commissioner of Developmental  
271 Services, or [his] the commissioner's designee; the Secretary of the  
272 Office of Policy and Management, or [his] the secretary's designee; the  
273 State Comptroller, or [his] the comptroller's designee; a representative  
274 of advocacy for mental retardation to be appointed by the president

275 pro tempore of the Senate; a representative of advocacy for the elderly  
276 to be appointed by the majority leader of the Senate; a representative  
277 of the nursing home industry to be appointed by the minority leader of  
278 the Senate; a representative of the home health care industry,  
279 independent of the nursing home industry, to be appointed by the  
280 speaker of the House of Representatives; a representative of the mental  
281 health profession to be appointed by the majority leader of the House  
282 of Representatives; a representative of the substance abuse profession  
283 to be appointed by the minority leader of the House of  
284 Representatives; a health care provider to be appointed by the  
285 president pro tempore of the Senate; two elderly consumers of  
286 Medicaid services who are also eligible for Medicare, to be appointed  
287 by the speaker of the House of Representatives; a representative of the  
288 managed care industry, to be appointed by the president pro tempore  
289 of the Senate; a social services care provider, to be appointed by the  
290 majority leader of the House of Representatives; a family support care  
291 provider, to be appointed by the majority leader of the Senate; two  
292 persons with disabilities who are consumers of Medicaid services, one  
293 to be appointed by the president pro tempore of the Senate and one to  
294 be appointed by the minority leader of the House of Representatives; a  
295 representative of legal advocacy for Medicaid clients, to be appointed  
296 by the minority leader of the Senate; and six members of the General  
297 Assembly, one member appointed by the president pro tempore of the  
298 Senate; one member appointed by the majority leader of the Senate;  
299 one member appointed by the minority leader of the Senate; one  
300 member appointed by the speaker of the House of Representatives;  
301 one member appointed by the majority leader of the House of  
302 Representatives; and one member appointed by the minority leader of  
303 the House of Representatives. The council shall be responsible for  
304 advising the Department of Social Services, which shall be the lead  
305 agency in the development of a Medicaid Research and Demonstration  
306 Waiver under Section 1115 of the Social Security Act for application to  
307 the Office of State Health Reform of the United States Department of  
308 Health and Human Services by May 1, 1996. The council shall advise  
309 the department with respect to specific provisions within the waiver

310 application, including but not limited to, the identification of  
311 populations to be included in a managed care program, a timetable for  
312 inclusion of distinct populations, expansion of access to care, quality  
313 assurance and grievance procedures for consumers and providers. The  
314 council shall also advise the department with respect to the goals of  
315 the waiver, including but not limited to, the expansion of access and  
316 coverage, making state health spending more efficient and to the  
317 reduction of uncompensated care.

318       Sec. 8. Section 17b-33 of the general statutes is repealed and the  
319 following is substituted in lieu thereof (*Effective July 1, 2013*):

320       The Department [of Social Services] on Aging shall establish, within  
321 available appropriations, a fall prevention program. Within such  
322 program, the department shall:

323       (1) Promote and support research to: (A) Improve the identification,  
324 diagnosis, treatment and rehabilitation of older adults and others who  
325 have a high risk of falling; (B) improve data collection and analysis to  
326 identify risk factors for falls and factors that reduce the likelihood of  
327 falls; (C) design, implement and evaluate the most effective fall  
328 prevention interventions; (D) improve intervention strategies that have  
329 been proven effective in reducing falls by tailoring such strategies to  
330 specific populations of older adults; (E) maximize the dissemination of  
331 proven, effective fall prevention interventions; (F) assess the risk of  
332 falls occurring in various settings; (G) identify barriers to the adoption  
333 of proven interventions with respect to the prevention of falls among  
334 older adults; (H) develop, implement and evaluate the most effective  
335 approaches to reducing falls among high-risk older adults living in  
336 communities and long-term care and assisted living facilities; and (I)  
337 evaluate the effectiveness of community programs designed to prevent  
338 falls among older adults;

339       (2) Establish, in consultation with the Commissioner of Public  
340 Health, a professional education program in fall prevention, evaluation  
341 and management for physicians, allied health professionals and other

342 health care providers who provide services for the elderly in this state.  
343 The Commissioner [of Social Services] on Aging may contract for the  
344 establishment of such program through (A) a request for proposal  
345 process, (B) a competitive grant program, or (C) cooperative  
346 agreements with qualified organizations, institutions or consortia of  
347 qualified organizations and institutions;

348 (3) Oversee and support demonstration and research projects to be  
349 carried out by organizations, institutions or consortia of organizations  
350 and institutions deemed qualified by the Commissioner [of Social  
351 Services] on Aging. Such demonstration and research projects may be  
352 in the following areas:

353 (A) Targeted fall risk screening and referral programs;

354 (B) Programs designed for community-dwelling older adults that  
355 use fall intervention approaches, including physical activity,  
356 medication assessment and reduction of medication when possible,  
357 vision enhancement and home-modification strategies;

358 (C) Programs that target new fall victims who are at a high risk for  
359 second falls and that are designed to maximize independence and  
360 quality of life for older adults, particularly those older adults with  
361 functional limitations;

362 (D) Private sector and public-private partnerships to develop  
363 technologies to prevent falls among older adults and prevent or reduce  
364 injuries when falls occur; and

365 (4) Award grants to, or enter into contracts or cooperative  
366 agreements with, organizations, institutions or consortia of  
367 organizations and institutions deemed qualified by the Commissioner  
368 [of Social Services] on Aging to design, implement and evaluate fall  
369 prevention programs using proven intervention strategies in  
370 residential and institutional settings.

371 Sec. 9. Section 17b-251 of the general statutes is repealed and the

372 following is substituted in lieu thereof (*Effective July 1, 2013*):

373 The Department [of Social Services] on Aging shall establish an  
374 outreach program to educate consumers as to: (1) The need for long-  
375 term care; (2) mechanisms for financing such care; (3) the availability  
376 of long-term care insurance; and (4) the asset protection provided  
377 under sections 17b-252 to 17b-254, inclusive, and 38a-475, as amended  
378 by this act. The Department [of Social Services] on Aging shall provide  
379 public information to assist individuals in choosing appropriate  
380 insurance coverage.

381 Sec. 10. Section 17b-400 of the general statutes is repealed and the  
382 following is substituted in lieu thereof (*Effective July 1, 2013*):

383 (a) As used in this chapter:

384 (1) "State agency" means the [Division of Elderly Services of the  
385 Department of Social Services] Department on Aging.

386 (2) "Office" means the Office of the Long-Term Care Ombudsman  
387 established in this section.

388 (3) "State Ombudsman" means the State Ombudsman established in  
389 this section.

390 (4) "Program" means the long-term care ombudsman program  
391 established in this section.

392 (5) "Representative" includes a regional ombudsman, a residents'  
393 advocate or an employee of the Office of the Long-Term Care  
394 Ombudsman who is individually designated by the [ombudsman]  
395 State Ombudsman.

396 (6) "Resident" means an older individual who resides in or is a  
397 patient in a long-term care facility who is sixty years of age or older.

398 (7) "Long-term care facility" means any skilled nursing facility, as  
399 defined in Section 1819(a) of the Social Security Act, (42 USC 1395i-

400 3(a)) any nursing facility, as defined in Section 1919(a) of the Social  
401 Security Act, (42 USC 1396r(a)) a board and care facility as defined in  
402 Section 102(19) of the federal Older Americans Act, (42 USC 3002(19))  
403 and for purposes of ombudsman program coverage, an institution  
404 regulated by the state pursuant to Section 1616(e) of the Social Security  
405 Act, (42 USC 1382e(e)) and any other adult care home similar to a  
406 facility or nursing facility or board and care home.

407 (8) "Commissioner" means the Commissioner [of Social Services] on  
408 Aging.

409 [(9) "Director" means the director of the Division of Elderly Services  
410 of the Department of Social Services.]

411 [(10)] (9) "Applicant" means an older individual who has applied for  
412 admission to a long-term care facility.

413 (b) There is established an independent Office of the Long-Term  
414 Care Ombudsman within the Department [of Social Services] on  
415 Aging. The Commissioner [of Social Services] on Aging shall appoint a  
416 State Ombudsman who shall be selected from among individuals with  
417 expertise and experience in the fields of long-term care and advocacy  
418 to head the office and the State Ombudsman shall appoint assistant  
419 regional ombudsmen. In the event the State Ombudsman or an  
420 assistant regional ombudsman is unable to fulfill the duties of the  
421 office, the commissioner shall appoint an acting State Ombudsman and  
422 the State Ombudsman shall appoint an acting assistant regional  
423 ombudsman.

424 (c) Notwithstanding the provisions of subsection (b) of this section,  
425 on and after July 1, 1990, the positions of State Ombudsman and  
426 regional ombudsmen shall be classified service positions. The State  
427 Ombudsman and regional ombudsmen holding said positions on said  
428 date shall continue to serve in their positions as if selected through  
429 classified service procedures. As vacancies occur in such positions  
430 thereafter, such vacancies shall be filled in accordance with classified

431 service procedures.

432 Sec. 11. Section 17b-405 of the general statutes is repealed and the  
433 following is substituted in lieu thereof (*Effective July 1, 2013*):

434 The regional ombudsmen shall, in accordance with the policies and  
435 procedures established by the Office of the Long-Term Care  
436 Ombudsman: [and the director:]

437 (1) Provide services to protect the health, safety, welfare and rights  
438 of residents;

439 (2) Ensure that residents in service areas have regular timely access  
440 to representatives of the program and timely responses to complaints  
441 and requests for assistance;

442 (3) Identify, investigate and resolve complaints made by or on  
443 behalf of residents that relate to action, inaction or decisions that may  
444 adversely affect the health, safety, welfare or rights of the residents or  
445 by, or on behalf of, applicants in relation to issues concerning  
446 applications to long-term care facilities;

447 (4) Represent the interests of residents and applicants, in relation to  
448 their applications to long-term care facilities, before government  
449 agencies and seek administrative, legal and other remedies to protect  
450 the health, safety, welfare and rights of the residents;

451 (5) (A) Review and, if necessary, comment on any existing and  
452 proposed laws, regulations and other government policies and actions  
453 that pertain to the rights and well-being of residents and applicants in  
454 relation to their applications to long-term care facilities, and (B)  
455 facilitate the ability of the public to comment on the laws, regulations,  
456 policies and actions;

457 (6) Support the development of resident and family councils; and

458 (7) Carry out other activities that the State Ombudsman determines

459 to be appropriate.

460 Sec. 12. Subsection (c) of section 17b-406 of the general statutes is  
461 repealed and the following is substituted in lieu thereof (*Effective July*  
462 *1, 2013*):

463 (c) The Commissioner [of Social Services] on Aging shall have  
464 authority to seek funding for the purposes contained in this section  
465 from public and private sources, including but not limited to any  
466 federal or state funded programs.

467 Sec. 13. Section 17b-411 of the general statutes is repealed and the  
468 following is substituted in lieu thereof (*Effective July 1, 2013*):

469 The Commissioner [of Social Services] on Aging, after consultation  
470 with the State Ombudsman, shall adopt regulations in accordance with  
471 the provisions of chapter 54, to carry out the provisions of sections 17b-  
472 400 to 17b-412, inclusive, as amended by this act, 19a-531 and 19a-532.

473 Sec. 14. Section 17b-412 of the general statutes is repealed and the  
474 following is substituted in lieu thereof (*Effective July 1, 2013*):

475 The [director] Commissioner on Aging shall require the State  
476 Ombudsman to:

477 (1) Prepare an annual report:

478 (A) Describing the activities carried out by the office in the year for  
479 which the report is prepared;

480 (B) Containing and analyzing the data collected under section 17b-  
481 413;

482 (C) Evaluating the problems experienced by and the complaints  
483 made by or on behalf of residents;

484 (D) Containing recommendations for (i) improving the quality of  
485 the care and life of the residents, and (ii) protecting the health, safety,

486 welfare and rights of the residents;

487 (E) (i) Analyzing the success of the program including success in  
488 providing services to residents of long-term care facilities; and (ii)  
489 identifying barriers that prevent the optimal operation of the program;  
490 and

491 (F) Providing policy, regulatory and legislative recommendations to  
492 solve identified problems, to resolve the complaints, to improve the  
493 quality of the care and life of residents, to protect the health, safety,  
494 welfare and rights of residents and to remove the barriers that prevent  
495 the optimal operation of the program.

496 (2) Analyze, comment on and monitor the development and  
497 implementation of federal, state and local laws, regulations and other  
498 government policies and actions that pertain to long-term care facilities  
499 and services, and to the health, safety, welfare and rights of residents  
500 in the state, and recommend any changes in such laws, regulations and  
501 policies as the office determines to be appropriate.

502 (3) (A) Provide such information as the office determines to be  
503 necessary to public and private agencies, legislators and other persons,  
504 regarding (i) the problems and concerns of older individuals residing  
505 in long-term care facilities; and (ii) recommendations related to the  
506 problems and concerns; and (B) make available to the public and  
507 submit to the federal assistant secretary for aging, the Governor, the  
508 General Assembly, the Department of Public Health and other  
509 appropriate governmental entities, each report prepared under  
510 subdivision (1) of this section.

511 Sec. 15. Section 17b-421 of the general statutes is repealed and the  
512 following is substituted in lieu thereof (*Effective July 1, 2013*):

513 The state shall be divided into five elderly planning and service  
514 areas, in accordance with federal law and regulations, each having an  
515 area agency on aging to carry out the mandates of the federal Older  
516 Americans Act of 1965, as amended. The area agencies shall (1)

517 represent elderly persons within their geographic areas, (2) develop an  
518 area plan for approval by the Department [of Social Services] on Aging  
519 and upon such approval administer the plan, (3) coordinate and assist  
520 local public and nonprofit, private agencies in the development of  
521 programs, (4) receive and distribute federal and state funds for such  
522 purposes, in accordance with applicable law, (5) carry out any  
523 additional duties and functions required by federal law and  
524 regulations.

525 Sec. 16. Section 17b-422 of the general statutes is repealed and the  
526 following is substituted in lieu thereof (*Effective July 1, 2013*):

527 (a) The Department [of Social Services] on Aging shall equitably  
528 allocate, in accordance with federal law, federal funds received under  
529 Title IIIB and IIIC of the Older Americans Act to the five area agencies  
530 on aging established pursuant to section 17b-421, as amended by this  
531 act. The department, before seeking federal approval to spend any  
532 amount above that allotted for administrative expenses under said act,  
533 shall inform the joint standing [committee] committees of the General  
534 Assembly having cognizance of matters relating to aging and human  
535 services that it is seeking such approval.

536 (b) Sixty per cent of the state funds appropriated to the five area  
537 agencies on aging for elderly nutrition and social services shall be  
538 allocated in the same proportion as allocations made pursuant to  
539 subsection (a) of this section. Forty per cent of all state funds  
540 appropriated to the five area agencies on aging for elderly nutrition  
541 and social services used for purposes other than the required  
542 nonfederal matching funds shall be allocated at the discretion of the  
543 Commissioner [of Social Services] on Aging, in consultation with the  
544 five area agencies on aging, based on their need for such funds. Any  
545 state funds appropriated to the five area agencies on aging for  
546 administrative expenses shall be allocated equally.

547 (c) The Department [of Social Services] on Aging, in consultation  
548 with the five area agencies on aging, shall review the method of

549 allocation set forth in subsection (a) of this section and shall report any  
550 findings or recommendations to the joint standing committees of the  
551 General Assembly having cognizance of matters relating to  
552 appropriations and the budgets of state agencies and human services.

553 (d) An area agency may request a person participating in the elderly  
554 nutrition program to pay a voluntary fee for meals furnished, except  
555 that no eligible person shall be denied a meal due to an inability to pay  
556 such fee.

557 Sec. 17. Section 17b-425 of the general statutes is repealed and the  
558 following is substituted in lieu thereof (*Effective July 1, 2013*):

559 The Department [of Social Services] on Aging may make a grant to  
560 any city, town or borough or public or private agency, organization or  
561 institution for the following purposes: (a) For community planning  
562 and coordination of programs carrying out the purposes of the Older  
563 Americans Act of 1965, as amended; (b) for demonstration programs or  
564 activities particularly valuable in carrying out such purposes; (c) for  
565 training of special personnel needed to carry out such programs and  
566 activities; (d) for establishment of new or expansion of existing  
567 programs to carry out such purposes, including establishment of new  
568 or expansion of existing centers of service for elderly persons,  
569 providing recreational, cultural and other leisure time activities, and  
570 informational, transportation, referral and preretirement and  
571 postretirement counseling services for elderly persons and assisting  
572 such persons in providing volunteer community or civic services,  
573 except that no costs of construction, other than for minor alterations  
574 and repairs, shall be included in such establishment or expansion; (e)  
575 for programs to develop or demonstrate approaches, methods and  
576 techniques for achieving or improving coordination of community  
577 services for elderly or aging persons and such other programs and  
578 services as may be allowed under Title III of the Older Americans Act  
579 of 1965, as amended, or to evaluate these approaches, techniques and  
580 methods, as well as others which may assist elderly or aging persons  
581 to enjoy wholesome and meaningful living and to continue to

582 contribute to the strength and welfare of the state and nation.

583 Sec. 18. Section 17b-426 of the general statutes is repealed and the  
584 following is substituted in lieu thereof (*Effective July 1, 2013*):

585 The Department [of Social Services] on Aging may use moneys  
586 appropriated for the purposes of section 17b-425, as amended by this  
587 act, for the expenses of administering the grant program under said  
588 section, provided the total of such moneys so used shall not exceed  
589 five per cent of the moneys so appropriated.

590 Sec. 19. Section 17b-427 of the general statutes is repealed and the  
591 following is substituted in lieu thereof (*Effective July 1, 2013*):

592 (a) As used in this section:

593 (1) "CHOICES" means Connecticut's programs for health insurance  
594 assistance, outreach, information and referral, counseling and  
595 eligibility screening;

596 (2) "CHOICES health insurance assistance program" means the  
597 federally recognized state health insurance assistance program funded  
598 pursuant to P.L. 101-508 and administered by the Department [of  
599 Social Services] on Aging, in conjunction with the area agencies on  
600 aging and the Center for Medicare Advocacy, that provides free  
601 information and assistance related to health insurance issues and  
602 concerns of older persons and other Medicare beneficiaries in  
603 Connecticut; and

604 (3) "Medicare organization" means any corporate entity or other  
605 organization or group that contracts with the federal Centers for  
606 Medicare and Medicaid Services to provide health care services to  
607 Medicare beneficiaries in this state as an alternative to the traditional  
608 Medicare fee-for-service plan.

609 (b) The Department [of Social Services] on Aging shall administer  
610 the CHOICES health insurance assistance program, which shall be a

611 comprehensive Medicare advocacy program that provides assistance  
612 to Connecticut residents who are Medicare beneficiaries. The program  
613 shall: (1) Maintain a toll-free telephone number to provide advice and  
614 information on Medicare benefits, including prescription drug benefits  
615 available through the Medicare Part D program, the Medicare appeals  
616 process, health insurance matters applicable to Medicare beneficiaries  
617 and long-term care options available in the state at least five days per  
618 week during normal business hours; (2) provide information, advice  
619 and representation, where appropriate, concerning the Medicare  
620 appeals process, by a qualified attorney or paralegal at least five days  
621 per week during normal business hours; (3) prepare and distribute  
622 written materials to Medicare beneficiaries, their families, senior  
623 citizens and organizations regarding Medicare benefits, including  
624 prescription drug benefits available through the Medicare Part D  
625 program and long-term care options available in the state; (4) develop  
626 and distribute a Connecticut Medicare consumers guide, after  
627 consultation with the Insurance Commissioner and other organizations  
628 involved in servicing, representing or advocating for Medicare  
629 beneficiaries, which shall be available to any individual, upon request,  
630 and shall include: (A) Information permitting beneficiaries to compare  
631 their options for delivery of Medicare services; (B) information  
632 concerning the Medicare plans available to beneficiaries, including the  
633 traditional Medicare fee-for-service plan, Medicare Part D plans and  
634 the benefits and services available through each plan; (C) information  
635 concerning the procedure to appeal a denial of care and the procedure  
636 to request an expedited appeal of a denial of care; (D) information  
637 concerning private insurance policies and federal and state-funded  
638 programs that are available to supplement Medicare coverage for  
639 beneficiaries; (E) a worksheet for beneficiaries to use to evaluate the  
640 various plans, including Medicare Part D programs; and (F) any other  
641 information the program deems relevant to beneficiaries; (5)  
642 collaborate with other state agencies and entities in the development of  
643 consumer-oriented web sites that provide information on Medicare  
644 plans, including Medicare Part D plans, and long-term care options  
645 that are available in the state; and (6) include any functions the

646 department deems necessary to conform to federal grant requirements.

647 (c) The Insurance Commissioner, in cooperation with, or on behalf  
648 of, the Commissioner [of Social Services] on Aging, may require each  
649 Medicare organization to: (1) Annually submit to the commissioner  
650 any data, reports or information relevant to plan beneficiaries; and (2)  
651 at any other times at which changes occur, submit information to the  
652 commissioner concerning current benefits, services or costs to  
653 beneficiaries. Such information may include information required  
654 under section 38a-478c.

655 (d) Each Medicare organization that fails to file the annual data,  
656 reports or information requested pursuant to subsection (c) of this  
657 section shall pay a late fee of one hundred dollars per day for each day  
658 from the due date of such data, reports or information to the date of  
659 filing. Each Medicare organization that files incomplete annual data,  
660 reports or information shall be so informed by the Insurance  
661 Commissioner, shall be given a date by which to remedy such  
662 incomplete filing and shall pay said late fee commencing from the new  
663 due date.

664 (e) Not later than June 1, 2001, and annually thereafter, the  
665 Insurance Commissioner, in conjunction with the Healthcare  
666 Advocate, shall submit to the Governor and to the joint standing  
667 committees of the General Assembly having cognizance of matters  
668 relating to aging, human services and insurance [and to the select  
669 committee of the General Assembly having cognizance of matters  
670 relating to aging,] a list of those Medicare organizations that have  
671 failed to file any data, reports or information requested pursuant to  
672 subsection (c) of this section.

673 (f) All hospitals, as defined in section 19a-490, which treat persons  
674 covered by Medicare Part A shall: (1) Notify incoming patients covered  
675 by Medicare of the availability of the services established pursuant to  
676 subsection (b) of this section, (2) post or cause to be posted in a  
677 conspicuous place therein the toll-free number established pursuant to

678 subsection (b) of this section, and (3) provide each Medicare patient  
679 with the toll-free number and information on how to access the  
680 CHOICES program.

681 Sec. 20. Subsection (a) of section 17b-792 of the general statutes is  
682 repealed and the following is substituted in lieu thereof (*Effective July*  
683 *1, 2013*):

684 (a) The Department [of Social Services] on Aging shall be  
685 responsible for the administration of programs which provide  
686 nutritionally sound diets to needy elderly persons and for the  
687 expansion of such programs when possible. Such programs shall be  
688 continued in such a manner as to fully utilize congregate feeding and  
689 nutrition education of elderly citizens who qualify for such program.

690 Sec. 21. Subsection (c) of section 17b-337 of the general statutes is  
691 repealed and the following is substituted in lieu thereof (*Effective July*  
692 *1, 2013*):

693 (c) The Long-Term Care Planning Committee shall consist of: (1)  
694 The chairpersons and ranking members of the joint standing [and  
695 select] committees of the General Assembly having cognizance of  
696 matters relating to human services, public health, elderly services and  
697 long-term care; (2) the Commissioner of Social Services, or the  
698 commissioner's designee; (3) one member of the Office of Policy and  
699 Management appointed by the Secretary of the Office of Policy and  
700 Management; (4) one member from the Department [of Social Services]  
701 on Aging appointed by the Commissioner [of Social Services] on  
702 Aging; (5) two members from the Department of Public Health  
703 appointed by the Commissioner of Public Health, one of whom is from  
704 the Office of Health Care Access division of the department; (6) one  
705 member from the Department of [Economic and Community  
706 Development] Housing appointed by the Commissioner of [Economic  
707 and Community Development] Housing; (7) one member from the  
708 Department of Developmental Services appointed by the  
709 Commissioner of Developmental Services; (8) one member from the

710 Department of Mental Health and Addiction Services appointed by the  
711 Commissioner of Mental Health and Addiction Services; (9) one  
712 member from the Department of Transportation appointed by the  
713 Commissioner of Transportation; (10) one member from the  
714 Department of Children and Families appointed by the Commissioner  
715 of Children and Families; and (11) the executive director of the Office  
716 of Protection and Advocacy for Persons with Disabilities or the  
717 executive director's designee. The committee shall convene no later  
718 than ninety days after June 4, 1998. Any vacancy shall be filled by the  
719 appointing authority. The chairperson shall be elected from among the  
720 members of the committee. The committee shall seek the advice and  
721 participation of any person, organization or state or federal agency it  
722 deems necessary to carry out the provisions of this section.

723 Sec. 22. Section 17b-349e of the general statutes is repealed and the  
724 following is substituted in lieu thereof (*Effective July 1, 2013*):

725 (a) As used in this section:

726 (1) "Respite care services" means support services which provide  
727 short-term relief from the demands of ongoing care for an individual  
728 with Alzheimer's disease.

729 (2) "Caretaker" means a person who has the responsibility for the  
730 care of an individual with Alzheimer's disease or has assumed the  
731 responsibility for such individual voluntarily, by contract or by order  
732 of a court of competent jurisdiction.

733 (3) "Copayment" means a payment made by or on behalf of an  
734 individual with Alzheimer's disease for respite care services.

735 (4) "Individual with Alzheimer's disease" means an individual with  
736 Alzheimer's disease or related disorders.

737 (b) The Commissioner [of Social Services] on Aging shall operate a  
738 program, within available appropriations, to provide respite care  
739 services for caretakers of individuals with Alzheimer's disease,

740 provided such individuals with Alzheimer's disease meet the  
741 requirements set forth in subsection (c) of this section. Such respite  
742 care services may include, but need not be limited to (1) homemaker  
743 services; (2) adult day care; (3) temporary care in a licensed medical  
744 facility; (4) home-health care; (5) companion services; or (6) personal  
745 care assistant services. Such respite care services may be administered  
746 directly by the [department] Department on Aging, or through  
747 contracts for services with providers of such services, or by means of  
748 direct subsidy to caretakers of individuals with Alzheimer's disease to  
749 purchase such services.

750 (c) (1) No individual with Alzheimer's disease may participate in the  
751 program if such individual (A) has an annual income of more than  
752 forty-one thousand dollars or liquid assets of more than one hundred  
753 nine thousand dollars, or (B) is receiving services under the  
754 Connecticut home-care program for the elderly. On July 1, 2009, and  
755 annually thereafter, the commissioner shall increase such income and  
756 asset eligibility criteria over that of the previous fiscal year to reflect  
757 the annual cost of living adjustment in Social Security income, if any.

758 (2) No individual with Alzheimer's disease who participates in the  
759 program may receive more than three thousand five hundred dollars  
760 for services under the program in any fiscal year or receive more than  
761 thirty days of out-of-home respite care services other than adult day  
762 care services under the program in any fiscal year, except that the  
763 commissioner shall adopt regulations pursuant to subsection (d) of this  
764 section to provide up to seven thousand five hundred dollars for  
765 services to a participant in the program who demonstrates a need for  
766 additional services.

767 (3) The commissioner may require an individual with Alzheimer's  
768 disease who participates in the program to pay a copayment for respite  
769 care services under the program, except the commissioner may waive  
770 such copayment upon demonstration of financial hardship by such  
771 individual.

772 (d) The commissioner shall adopt regulations in accordance with the  
773 provisions of chapter 54 to implement the provisions of this section.  
774 Such regulations shall include, but need not be limited to (1) standards  
775 for eligibility for respite care services; (2) the basis for priority in  
776 receiving services; (3) qualifications and requirements of providers,  
777 which shall include specialized training in Alzheimer's disease,  
778 dementia and related disorders; (4) a requirement that providers  
779 accredited by the Joint Commission on the Accreditation of Healthcare  
780 Organizations, when available, receive preference in contracting for  
781 services; (5) provider reimbursement levels; (6) limits on services and  
782 cost of services; and (7) a fee schedule for copayments.

783 (e) The Commissioner [of Social Services] on Aging may allocate  
784 any funds appropriated in excess of five hundred thousand dollars for  
785 the program among the five area agencies on aging according to need,  
786 as determined by said commissioner.

787 Sec. 23. Subsection (a) of section 17b-367a of the general statutes is  
788 repealed and the following is substituted in lieu thereof (*Effective July*  
789 *1, 2013*):

790 (a) The Commissioner [of Social Services] on Aging shall develop  
791 and administer a Community Choices program to provide a single,  
792 coordinated system of information and access for individuals seeking  
793 long-term support, including in-home, community-based and  
794 institutional services. The Community Choices program shall be the  
795 state Aging and Disability Resource Center Program in accordance  
796 with the federal Older Americans Act Amendments of 2006, P.L. 109-  
797 365. Consumers served by the Community Choices program shall  
798 include, but not be limited to, those sixty years of age or older and  
799 those eighteen years of age or older with disabilities and caregivers.

800 Sec. 24. Subsection (c) of section 3-123aa of the general statutes is  
801 repealed and the following is substituted in lieu thereof (*Effective July*  
802 *1, 2013*):

803 (c) There is established an advisory committee to the Connecticut  
804 Homecare Option Program for the Elderly, which shall consist of the  
805 State Treasurer, the State Comptroller, the Commissioner of Social  
806 Services, [a representative of the Commission on Aging] the  
807 Commissioner on Aging, the director of the long-term care partnership  
808 policy program within the Office of Policy and Management, and the  
809 cochairpersons and ranking members of the joint standing committees  
810 of the General Assembly having cognizance of matters relating to  
811 aging, human services and finance, revenue and bonding, [and the  
812 cochairpersons and ranking members of the select committee having  
813 cognizance of matters relating to aging,] or their designees. The  
814 Governor shall appoint one provider of home care services for the  
815 elderly and a physician specializing in geriatric care. The advisory  
816 committee shall meet at least annually. The State Comptroller shall  
817 convene the meetings of the committee.

818 Sec. 25. Subsection (a) of section 16a-41b of the general statutes is  
819 repealed and the following is substituted in lieu thereof (*Effective July*  
820 *1, 2013*):

821 (a) There shall be a Low-Income Energy Advisory Board which shall  
822 consist of the following members or their designees: The [executive  
823 director of the Commission on Aging] Commissioner on Aging or the  
824 commissioner's designee; a representative of each electric and gas  
825 public service company designated by each such company; the  
826 chairperson of the Public Utilities Regulatory Authority; the Consumer  
827 Counsel; the executive director of Operation Fuel; the executive  
828 director of Infoline; the director of the Connecticut Local  
829 Administrators of Social Services; the executive director of Legal  
830 Assistance Resource Center of Connecticut; the Connecticut president  
831 of AARP; a designee of the Norwich Public Utility; a designee of the  
832 Independent Connecticut Petroleum Association; and a representative  
833 of the community action agencies administering energy assistance  
834 programs under contract with the Department of Social Services,  
835 designated by the Connecticut Association for Community Action. The

836 Secretary of the Office of Policy and Management and the  
837 Commissioners of Social Services and Energy and Environmental  
838 Protection, or their designees, shall serve as nonvoting members of the  
839 board.

840 Sec. 26. Subsection (a) of section 17b-253 of the general statutes is  
841 repealed and the following is substituted in lieu thereof (*Effective July*  
842 *1, 2013*):

843 (a) The Department of Social Services shall seek appropriate  
844 amendments to its Medicaid regulations and state plan to allow  
845 protection of resources and income pursuant to section 17b-252. Such  
846 protection shall be provided, to the extent approved by the federal  
847 Centers for Medicare and Medicaid Services, for any purchaser of a  
848 precertified long-term care policy and shall last for the life of the  
849 purchaser. Such protection shall be provided under the Medicaid  
850 program or its successor program. Any purchaser of a precertified  
851 long-term care policy shall be guaranteed coverage under the  
852 Medicaid program or its successor program, to the extent the  
853 individual meets all applicable eligibility requirements for the  
854 Medicaid program or its successor program. Until such time as  
855 eligibility requirements are prescribed for Medicaid's successor  
856 program, for the purposes of this subsection, the applicable eligibility  
857 requirements shall be the Medicaid program's requirements as of the  
858 date its successor program was enacted. The Department of Social  
859 Services shall count insurance benefit payments toward resource  
860 exclusion to the extent such payments (1) are for services paid for by a  
861 precertified long-term care policy; (2) are for the lower of the actual  
862 charge and the amount paid by the insurance company; (3) are for  
863 nursing home care, or formal services delivered to insureds in the  
864 community as part of a care plan approved by an access agency  
865 approved by the Office of Policy and Management and the  
866 Department of Social Services as meeting the requirements for such  
867 agency as defined in regulations adopted pursuant to subsection (e) of  
868 section 17b-342; and (4) are for services provided after the individual

869 meets the coverage requirements for long-term care benefits  
870 established by the Department of Social Services for this program. The  
871 Commissioner of Social Services shall adopt regulations, in accordance  
872 with chapter 54, to implement the provisions of this subsection and  
873 sections [17b-251,] 17b-252, 17b-254 and 38a-475, as amended by this  
874 act, relating to determining eligibility of applicants for Medicaid, or its  
875 successor program, and the coverage requirements for long-term care  
876 benefits.

877 Sec. 27. Section 38a-475 of the general statutes is repealed and the  
878 following is substituted in lieu thereof (*Effective July 1, 2013*):

879 The Insurance Department shall only precertify long-term care  
880 insurance policies which (1) alert the purchaser to the availability of  
881 consumer information and public education provided by the  
882 Department [of Social Services] on Aging pursuant to section 17b-251,  
883 as amended by this act; (2) offer the option of home and community-  
884 based services in addition to nursing home care; (3) in all home care  
885 plans, include case management services delivered by an access  
886 agency approved by the Office of Policy and Management and the  
887 Department of Social Services as meeting the requirements for such  
888 agency as defined in regulations adopted pursuant to subsection (e) of  
889 section 17b-342, which services shall include, but need not be limited  
890 to, the development of a comprehensive individualized assessment  
891 and care plan and, as needed, the coordination of appropriate services  
892 and the monitoring of the delivery of such services; (4) provide  
893 inflation protection; (5) provide for the keeping of records and an  
894 explanation of benefit reports on insurance payments which count  
895 toward Medicaid resource exclusion; and (6) provide the management  
896 information and reports necessary to document the extent of Medicaid  
897 resource protection offered and to evaluate the Connecticut  
898 Partnership for Long-Term Care. No policy shall be precertified if it  
899 requires prior hospitalization or a prior stay in a nursing home as a  
900 condition of providing benefits. The commissioner may adopt  
901 regulations, in accordance with chapter 54, to carry out the

902 precertification provisions of this section.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2013</i>	7-127b
Sec. 2	<i>July 1, 2013</i>	8-119f
Sec. 3	<i>July 1, 2013</i>	17b-4
Sec. 4	<i>July 1, 2013</i>	17a-317
Sec. 5	<i>July 1, 2013</i>	17b-2
Sec. 6	<i>July 1, 2013</i>	17b-28(c)
Sec. 7	<i>July 1, 2013</i>	17b-28a(a)
Sec. 8	<i>July 1, 2013</i>	17b-33
Sec. 9	<i>July 1, 2013</i>	17b-251
Sec. 10	<i>July 1, 2013</i>	17b-400
Sec. 11	<i>July 1, 2013</i>	17b-405
Sec. 12	<i>July 1, 2013</i>	17b-406(c)
Sec. 13	<i>July 1, 2013</i>	17b-411
Sec. 14	<i>July 1, 2013</i>	17b-412
Sec. 15	<i>July 1, 2013</i>	17b-421
Sec. 16	<i>July 1, 2013</i>	17b-422
Sec. 17	<i>July 1, 2013</i>	17b-425
Sec. 18	<i>July 1, 2013</i>	17b-426
Sec. 19	<i>July 1, 2013</i>	17b-427
Sec. 20	<i>July 1, 2013</i>	17b-792(a)
Sec. 21	<i>July 1, 2013</i>	17b-337(c)
Sec. 22	<i>July 1, 2013</i>	17b-349e
Sec. 23	<i>July 1, 2013</i>	17b-367a(a)
Sec. 24	<i>July 1, 2013</i>	3-123aa(c)
Sec. 25	<i>July 1, 2013</i>	16a-41b(a)
Sec. 26	<i>July 1, 2013</i>	17b-253(a)
Sec. 27	<i>July 1, 2013</i>	38a-475

**Statement of Legislative Commissioners:**

Section 11 was added to make a conforming change.

**AGE**      *Joint Favorable Subst. -LCO*